



Florida Department of Environmental Protection

Bob Martinez Center
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

January 21, 2009

Mr. Louis Solomon
Berkshire Dry Cleaners
7055 Radio Road
Naples, Florida 34104

Re: Facility No.: 0210062-004

Dear Mr. Solomon:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on December 17, 2008.

Pursuant to Florida Statutes section 403.814, the authority to operate under general permits commences thirty (30) days after receipt of the registration form unless you have been notified by this office that your facility has not shown entitlement to operate pursuant to the rule provisions.

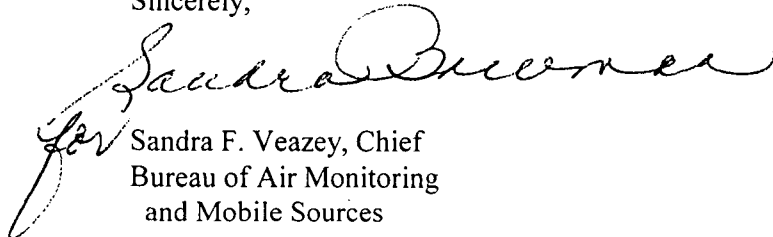
For your information, authority to operate pursuant to Rule 62-210.310 expires after five (5) years. Therefore, a new registration form must be received no later than five (5) years after the date your notice was received as indicated above. If your general permit rule conditions require testing, such testing must be completed within the time frame specified in the rule.

If you have or expect to have any changes in your mailing address, location address, responsible official, or phone number, please notify the Department at the following address:

Title V General Permits Office
Bureau of Air Monitoring and Mobile Sources MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, FL 32399-2400

If there are any changes in the facility status, including change of operating parameters or equipment, or if you have any additional questions regarding the Title V General Permit Program, please contact the district or local air program compliance inspector in your area.

Sincerely,



Sandra F. Veazey, Chief
Bureau of Air Monitoring
and Mobile Sources

SFV/pg

NO ACTIVITY FOR FACILITY
EMISSION FEE DATES
SOER VER REPORTS...*4*.....
COMP. STATUS - SNC MNC

2/13/2004

*INSP-INS2-Compliance Inspection
walk through - 2/13/2004-IN
INSP- Collier Co - SD - Sculliver*

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Bureau of Air Monitoring
& Mobile Sources

DEC 23 2008

RECEIVED

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner): SOLOMON ENTERPRISES, LLC DBA: BERKSHIRE DRY CLEANERS
2. Site Name (For example, plant name or number): BERKSHIRE CLEANERS & LAUNDRY
3. Hazardous Waste Generator Identification Number:
4. Facility Location: Street Address: 7055 RADIO RD. City: NAPLES County: FLORIDA Zip Code: 34104
5. Facility Identification Number (DEP Use ONLY - do not fill in) 0210062-004

Responsible Official

6. Name and Title of Responsible Official: Name: LOUIS SOLOMON Title: PRESIDENT
7. Responsible Official Mailing Address: Organization/Firm: AS ABOVE Street Address: City: NAPLES County: COLLIER - FL Zip Code: 34104
8. Responsible Official Telephone Number: Telephone: (239) 455-9666 Fax: (239) 455-3913 CELL: 239-222-0482 & 239-405-0707

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager): LOUIS OR YVONNE SOLOMON TERESA GONZALEZ - Plant Manager (OWNERS)
10. Facility Contact Address: AS ABOVE Street Address: City: County: Zip Code:
11. Facility Contact Telephone Number: AS ABOVE Telephone: () Fax: ()

Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY

How many dry-to-dry machines do you have on-site? ONE

For each dry-to-dry machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
5 # M103A-TSSC ECT 604-503 2000	Existing/New	RC/CA/None required	SAME
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site?

How many dryers/reclaimers do you have on-site?

If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an **EXISTING** unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a **NEW** unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

2.(a) How much perchloroethylene (perc) have you used within the last 12 months?

19,30 gallons (You must fill this in)

(b) If less than 12 months, how many? months

Check why it is less than 12 months: New owner: Did not keep records:

New store: New machine

Unopened store (date of expected opening _____)

3. What is the facility's source classification based on the definitions found in section (3) of Part II? Indicate with an "X". Select one classification only.)

- Small Area Source
 - Dry-to-dry machines only on-site (used less than 140 gallons of perc per year)
 - Transfer only on-site (used less than 200 gallons of perc per year)
 - Both machine types on-site (used less than 140 gallons of perc per year)
- Large Area Source
 - Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year)
 - Transfer only on-site (used 200 - 1,800 gallons of perc per year)
 - Both machine types on-site (used 140 - 1,800 gallons of perc per year)

4. What control technology is required on machines pursuant to section (5) of Part II of this notification form? (Indicate with an "X".)

- | | |
|--|---|
| <u>Existing machines at small area source</u>
(NONE REQUIRED) <input checked="" type="checkbox"/> | <u>New machines at small area source</u>
Refrigerated condenser <input type="checkbox"/> |
| <u>Existing machines at large area source</u>
Carbon adsorber <input type="checkbox"/>
Refrigerated condenser <input type="checkbox"/> | <u>New machines at large area source</u>
Refrigerated condenser <input type="checkbox"/> |

5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site (see attached memo for the criteria).

All steam and hot water generating units exempt OR
No such units on-site

How many boilers do you have on-site? /

For each boiler, indicate its horsepower (HP) rating: 30

What type of fuel do you use? propane natural gas
 No. 2 fuel oil No. 4 fuel oil
 No. 6 fuel oil Other (please list) _____

6. Equipment Monitoring and Recordkeeping Information

Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:

- (a) Purchase receipts and solvent purchases/solvent addition log
- (b) Leak detection inspection and repair
- (c) Refrigerated condenser temperature monitoring
- (d) Carbon adsorber exhaust perc concentration monitoring
- (e) Startup, shutdown, malfunction plan

RECEIVED

DEC 29 2008

7. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are

No DEP air permits currently exist for the operation of the facility indicated in this notification form.

Bureau of Air Monitoring & Mobile Sources

Responsible Official Certification

I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

I will promptly notify the Department of any changes to the information contained in this notification.

LOUIS SOLOMAN
Print name of responsible official

[Signature]
Signature

12/24/08
Date



Florida Department of Environmental Protection

Bob Martinez Center
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Charlie Crist
Governor

Jeff Kotthamp
Lt. Governor

Michael W. Sole
Secretary

F A X T R A N S M I T T A L S H E E T

DATE: 12/23/2008

TO: Mr. Louis Solomon, Solomon Ent. LLC

PHONE: (239) 455-9666

FAX: (239) 455-3913

FROM: Dickson E. Dibble

PHONE: (850) 921-9586

Division of Air Resources Management

FAX: (850) 922-6979

Bureau of Air Monitoring & Mobile Sources

Air General Permitting

RE: PERC DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM

CC: _____

Total number of pages including cover sheet: SIX (6)

Message

DEAR MR SOLOMON, PER OUR TELECON THIS AFTER-
NOON, I AM IN RECEIPT OF THE FIRST TWO OF FOUR PAGES
OF YOUR APPLICATION FORM ONLY. YOUR APPLICATION WILL
NOT BE COMPLETE UNTIL I RECEIVE THE REMAINING TWO
ORIGINALS. PLEASE COMPLETE THE FORM, SIGN AND DATE
AND MAIL THE ORIGINALS TO THE ADDRESS SHOWN ON
PAGE 18. THANK YOU FOR YOUR ATTENTION TO THIS
MATTER. SINCERELY, Dickson E. Dibble

If there are any problems with this fax transmittal, please call the above phone number.

"Protect, Conserve, and Manage Florida's Environmental and Natural Resources"

Printed on recycled paper

APPLICATION FOR REFUND FORM
THE STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION

STATE OF FLORIDA, COUNTY OF _____

Pursuant to the provisions of Section 215.26, or Section _____*, Florida Statutes, I hereby apply for a refund and request that a State Warrant be drawn in favor of:

NAME: BERKSHIRE DRY CLEANERS
ADDRESS: 7055 RADIO RD
NAPLES, FLORIDA 34104
AMOUNT: \$100.00 CHECK #: 1242 DEPOSIT DATE: 12-17-2008 DEPOSIT: 291316
DOCUMENT NUMBER: 489864 SYS RECEIPT#: 647677 PAYMENT#: 915314 REMIT#: 807684
REV OBJECT CODE: 002272 NON-TITLE V GENERAL PERMIT

which represents moneys I paid into the State Treasury subject to refund, and to substantiate such claim the following facts are submitted:

REASON FOR CLAIM: NO FEE DUE

CERTIFIED TRUE AND CORRECT this _____ day of _____, 20____.

Applicant's Signature

*Must be completed if authority is other than Section 215.26, Florida Statutes.

(FOR AGENCY USE ONLY)

(1) Agency recommends denial of above claim based on the following facts, including statutory authority for collection:

OR

(2) Agency recommends approval of above claim and submits the following information to substantiate such claim. \$100.00 was originally deposited into the State Treasury,

Receipt _____, dated _____.

NAME OF ACCOUNT:

SAMAS ACCOUNT CODE
3720252600137 _____ 0000000020000

Statutory Authority for Collection _____

It is requested that payment be made from:

NAME OF ACCOUNT:

SAMAS ACCOUNT CODE
3720252600137 _____ 0000002200000

CERTIFIED TRUE AND CORRECT this 31st day of December, 2008.

Rebecca D. Webb, ESTE Rebecca J. Mar SMATI

Signature and Title of Authorized Person

SECTION 215.26 STATES, IN PART: "APPLICATION FOR REFUNDS AS PROVIDED BY THIS SECTION SHALL BE FILED WITH THE COMPTROLLER, EXCEPT AS OTHERWISE PROVIDED HEREIN, WITHIN 3 YEARS AFTER THE RIGHT TO SUCH REFUND SHALL HAVE ACCRUED ELSE SUCH RIGHT SHALL BE BARRED."

Three years is interpreted as meaning three years from the date of payment into State Treasury.

Florida Department of Environmental Protection
Cash Receiving Application (CRA)
Cashlisting by Deposit #: 291316 thru 291316
Printed: 12/17/2008 4:03:07 PM - Page 11

Cashlisting: 72764 Cashlist Area: 3755 Description: DIV OF AIR RESOURCES MGMT.
 Deposit No: 291316 Date Deposited: 12/17/2008 Contact: E. WALKER

REFUND # 17097
NO FEE DUE
W/TV APPLICATIONS

Object	Transmittal	Dep.DDN	Receipt Number	Pre-Numbered Receipt	Name	Check Number	Payment Amount	Reference Account	Payment Number	Remittance Number	Fund	Grant
002272	52012	489864	647677		BERKSHIRE DRY CLEANERS	1242	\$100.00		915314	807684	PFTF	
	52031		647714		INNOVIDA SERVICES	1759	\$100.00		915340	807748	PFTF	
Object Code 002272 Subtotal:							\$200.00					
002309	52012	489867	647680		ORANGE COUNTY BOCC	0000729818	\$150.00		915318	807687	PFTF	
Object Code 002309 Subtotal:							\$150.00					
Cashlisting 72764 Total:							\$350.00					

Florida Department of Environmental Protection
Cash Receiving Application (CRA)
Cashlisting by Deposit #: 291316 thru 291316
Printed: 12/17/2008 4:03:07 PM - Page 11

Cashlisting: 72764 Cashlist Area: 3755 Description: DIV OF AIR RESOURCES MGMT.
 Deposit No: 291316 Date Deposited: 12/17/2008 Contact: E. WALKER

REFUND # 17097
NO FEE DUE
W/TV APPLICATIONS

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002272	52012	489864	647677		BERKSHIRE DRY CLEANERS	1242	\$100.00		915314	807684	PFTF		
	52031		647714		INNOVIDA SERVICES	1759	\$100.00		915340	807748	PFTF		
Object Code 002272 Subtotal:							\$200.00						
.002309	52012	489867	647680		ORANGE COUNTY BOCC	0000729818	\$150.00		915318	807687	PFTF		
Object Code 002309 Subtotal:							\$150.00						
Cashlisting 72764 Total:							\$350.00						

Wise, Jane

From: Wise, Jane
Sent: Monday, January 05, 2009 4:18 PM
To: Culliver, Sherrill; Satyal, Ajaya
Cc: Veazey, Sandra; Bowman, Sandy
Subject: Recently Received AG Registrations
Attachments: 0210062-004.pdf

The attached documents represent recently received air general permit registration forms for your area. As requested, each form has been scanned and attached for your office use. These registrations are currently in the 30-day review cycle. We request that any updates to EU information be made *after* the 30-day review cycle ends. The actual receipt date and other facility information may be obtained in GPCI.

The complete scanned file for each facility will be available in ADH Search after the 30-day review cycle.

If you have any questions or comments, please contact Dick Dibble at 850/921-9586 or by e-mail at dickson.dibble@dep.state.fl.us or Sandy Bowman at 850/921-9583 or by e-mail at sandy.bowman@dep.state.fl.us

1/5/2009

TRANSMISSION VERIFICATION REPORT

TIME : 12/23/2008 15:30
NAME : FDEP DIVISION OF AIR
FAX : 8509226979
TEL : 8504880114
SER. # : BROG2J568046

DATE, TIME 12/23 15:28
FAX NO./NAME 612394553913
DURATION 00:01:43
PAGE(S) 06
RESULT OK
MODE STANDARD
ECM



Florida Department of
Environmental Protection

Bob Martinez Center
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Charlie Crist
Governor

Jeff Kotthamp
Lt. Governor

Michael W. Sole
Secretary

F A X T R A N S M I T T A L S H E E T

DATE: 12/23/2008

TO: MR. LOUIS SOLOMON, SOLOMON ENT. LLC

PHONE: (239) 455-9666 FAX: (239) 455-3913

FROM: Dickson E. Dibble PHONE: (850) 921-9586

Division of Air Resources Management FAX: (850) 922-6979

Bureau of Air Monitoring & Mobile Sources

Air General Permitting

RE: PERC DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM

CC: _____

Total number of pages including cover sheet: SIX (6)

Message

DEAR MR SOLOMON, PER OUR TELECON THIS AFTER-

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
2. Site Name (For example, plant name or number):
3. Hazardous Waste Generator Identification Number:
4. Facility Location: Street Address: City: County: Zip Code:
5. Facility Identification Number (DEP Use ONLY - do not fill in):

Responsible Official

6. Name and Title of Responsible Official: Name: Title:
7. Responsible Official Mailing Address: Organization/Firm: Street Address: City: County: Zip Code:
8. Responsible Official Telephone Number: Telephone: () - Fax: () -

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):
10. Facility Contact Address: Street Address: City: County: Zip Code:
11. Facility Contact Telephone Number: Telephone: () - Fax: () -

Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY

How many dry-to-dry machines do you have on-site?

For each dry-to-dry machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site?

How many dryers/reclaimers do you have on-site?

If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an **EXISTING** unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a **NEW** unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

2.(a) How much perchloroethylene (perc) have you used within the last 12 months?

gallons (You must fill this in)

(b) If less than 12 months, how many? months

Check why it is less than 12 months: New owner: Did not keep records:

New store: New machine

Unopened store (date of expected opening _____)

3. What is the facility's source classification based on the definitions found in section (3) of Part II?
Indicate with an "X". Select one classification only.)

Small Area Source

- Dry-to-dry machines only on-site (used less than 140 gallons of perc per year)
- Transfer only on-site (used less than 200 gallons of perc per year)
- Both machine types on-site (used less than 140 gallons of perc per year)

Large Area Source

- Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year)
- Transfer only on-site (used 200 - 1,800 gallons of perc per year)
- Both machine types on-site (used 140 - 1,800 gallons of perc per year)

4. What control technology is required on machines pursuant to section (5) of Part II of this notification form?
(Indicate with an "X".)

Existing machines at small area source
(NONE REQUIRED)

New machines at small area source
Refrigerated condenser

Existing machines at large area source
Carbon adsorber
Refrigerated condenser

New machines at large area source
Refrigerated condenser

5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site (see attached memo for the criteria).

All steam and hot water generating units exempt **OR**
No such units on-site

How many boilers do you have on-site?

For each boiler, indicate its horsepower (HP) rating:

What type of fuel do you use? propane natural gas
 No. 2 fuel oil No. 4 fuel oil
 No. 6 fuel oil Other (please list) _____

6. Equipment Monitoring and Recordkeeping Information

Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:

- (a) Purchase receipts and solvent purchases/solvent addition log
- (b) Leak detection inspection and repair
- (c) Refrigerated condenser temperature monitoring
- (d) Carbon adsorber exhaust perc concentration monitoring
- (e) Startup, shutdown, malfunction plan

7. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

- I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are _____.
- No DEP air permits currently exist for the operation of the facility indicated in this notification form.

Responsible Official Certification

I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

I will promptly notify the Department of any changes to the information contained in this notification.

Print name of responsible official

Signature

Date

Instructions for Completing Part III of Notification Form

The Perchloroethylene Dry Cleaning Facility Notification of Intent to Use General Permit, Part III of this form, shall be completed and submitted to the Division of Air Resources Management **at least 30 days prior to beginning operations under the general permit.** Please type or print clearly all information. A copy of this notification form shall be kept on-site and made available for review by Department personnel.

The responsible official of the facility, as defined in Part II of this notification form, is responsible for ensuring that the facility complies with all applicable terms and conditions of this general permit, as set forth in Part II of this form.

Mail the signed and completed Part III of this form to:

General Permits Section
Bureau of Air Monitoring and Mobile Sources, MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, FL 32399-2400

Facility Name and Location

1. **Facility Owner/Company Name** - Enter the name of the corporation, agency, or individual that has ownership or control of the dry cleaning facility for which this notification is submitted.
2. **Site Name** - Enter the common name, if any, of the facility site; for example, Plant A, Metropolis plant, etc. If more than one facility is owned, a notification form must be completed for each.
3. **Hazardous Waste Generator Identification Number** - Enter the hazardous waste generator identification number, if known, assigned by the Department to the facility.
4. **Facility Location** - Enter the street address and zip code of the facility and the city and county in which it is located.
5. **Facility Identification Number (DEP Use ONLY)** - Please leave this space blank. DEP will enter the facility identification number assigned to you by ARMS.

Responsible Official

6. **Name and Title of Responsible Official** - Enter the name and title of the designated responsible official for the facility who, by signing this form, is certifying that the facility is eligible for a general permit pursuant to the requirements of Part II of this notification form and Rule 62-213.300, F.A.C.
7. **Responsible Official Mailing Address** - Enter the mailing address for the responsible official if different than the address entered in No. 4 above.
8. **Responsible Official Telephone Number** - Enter the telephone number and facsimile number, if available, at which the responsible official can be contacted.

Facility Contact

9. **Name and Title of Facility Contact** - Enter the name of the facility contact, if other than the responsible official. For example, a plant manager could be designated as the facility contact for Department inspections.



Florida Department of Environmental Protection

Bob Martinez Center
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

PROCESS CHANGE

May 1, 2008

To: Users of the Non-Title V Air General Permit

Records in the Division of Air Resource Management indicate that you have claimed eligibility for your facility to operate under a Non-Title V Air General Permit (AGP) pursuant to Chapter 62-210, Florida Administrative Code (F.A.C.) and your entitlement to operate is about to expire.

As a source of air pollution, your facility is entitled to operate for no more than five (5) years with an AGP under Section § 403.0872 Florida Statutes (F.S.). Rule 62-210.310, F.A.C., establishes that the duration of the AGP is for five (5) years, and no later than thirty (30) days prior to the fifth anniversary of the filing of intent to use this AGP, the owner/operator or authorized representative shall submit a new notice of intent which shall contain all current information regarding the facility.

If you wish to maintain your entitlement to operate, for your convenience, you may obtain a copy of the appropriate registration form in the following manner(s). You may download a copy of the registration form from the FDEP Air Resource Management webpage:

<http://www.floridadep.org/Air/forms/tvvp.htm>

or call the

Small Business Environmental Assistance Program (SBEAP) toll-free @: **1-800 722-7457**

As the Owner/Operator or authorized representative for this facility, please complete the form, sign your name, date it, and submit it along with the appropriate AGP Processing fee to the following address: *(Please see the AGP Processing Fee Schedule on the back side of this page).*

**FDEP
RECEIPTS
POST OFFICE BOX 3070
TALLAHASSEE, FL 32315-3070**

It is important to note that facilities not in compliance with the conditions of their existing Non-Title V AGP may not be eligible to use a new Non-Title V AGP after the existing authority period expires. Such facilities will be required to make application for an Air Operating Permit as a major source, or under Title V. It is very important for facilities to assure that they are now in compliance with their Non-Title V AGP conditions to avoid this costly situation.

URGENT!

IMPORTANT

A facility is eligible to operate under a Non-Title V Air General Permit (AGP) for no more than five (5) years. Your facility is approaching the end of the current five (5) year period for which it was entitled to operate under the Non-Title V AGP.

NEW OWNER? If you are a **NEW OWNER**, please check this box and return this page with your completed Non-Title V AGP Notification Form.

NEW OWNER/OPERATOR OR AUTHORIZED REPRESENTATIVE? If you are a **NEW OWNER/OPERATOR OR AUTHORIZED REPRESENTATIVE**, and/or your existing business has moved to a new location, please check this box and return this page with your completed Non-Title V AGP Notification Form.

- If you wish to continue your entitlement, please complete the Non-Title V AGP Notification Form, making certain that it is **signed by the OWNER/OPERATOR OR AUTHORIZED REPRESENTATIVE**, properly dated, including the appropriate AGP Processing fee, and mailed to the following address:

**FDEP
RECEIPTS
POST OFFICE BOX 3070
TALLAHASSEE, FL 32315-3070**

- If you do not wish to continue with your eligibility, please disregard this notice.
- An AGP processing fee is required to be submitted with the notification form according to the following fee schedule:

AGP FEE SCHEDULE

- 1) Volume Reduction, Mercury Recovery & Reclamation Processes = \$250.00 fee
(Professional Engineer (PE) Signature Is Required)
- 2) All other Non-Title V AGP programs = \$100.00 fee
(No Professional Engineer Signature Required)

Berkshire Dry Cleaners
7055 Radio Road
Naples, FL 34104

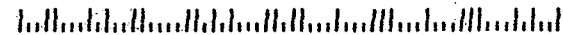
FORT MYERS FL 339

15 DEC 2008 PM 2 T



FDEP
RECEIPTS
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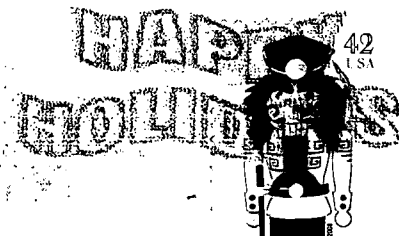
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Berkshire Dry Cleaners
7055 Radio Road
Naples, FL 34104

FORT MYERS FL 339

25 DEC 2008 PM 11L



Mr Dickson E. Dibble
General Permits Section
Bureau of Air Monitoring & Mobile Sources, MS 5510
Dept. of Environmental Protection
2600 Blair Stone Road
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